

NURSES'S ATTITUDES IN PREVENTING SUICIDE: A SURVEY

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SUMMARY

Introduction: Nowadays, suicide represents a serious public health problem worldwide. Nurses can play a critical role in suicide prevention. Knowing risk factors and recognizing warning signs for suicide should be part of the professional background of any nurse training programs.

Methods: Our study presents the preliminary descriptive findings from an online survey in nursing staff operating in various areas (medical, surgical, critical and emergency) in the Apulia region. The survey aimed to assess the current knowledge, attitudes, behaviors and training needs of nurses regarding suicide prevention. We administered a questionnaire created with Google forms to a sample of subjects obtained through sampling a reasoned choice.

Results and conclusions: Our study highlighted the lack of perceived competence toward the suicidal patient and the need to implement specific training programs for nurses on the management of patients at risk of suicide. An adequate level of knowledge and competence regarding suicide prevention among healthcare professionals could significantly contribute to improving the quality of care provided to patients at risk for suicide, reducing the risk of suicidal events and improving the overall quality of the care pathway.

Key words: nurse – suicide – prevention - training

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INTRODUCTION

Nowadays, suicide represents a serious public health problem worldwide. The WHO estimated that more than 700 000 people die by suicide every year, which is one person every 40 seconds (WHO 2019). Identifying and adopting suicide preventive strategies must be a priority in order to achieve the global target of reducing the rate of suicide in countries by one third by the year 2030, according to the Comprehensive Mental Health Action Plan 2013-2030 (WHO 2021).

Nurses can play a critical role in suicide prevention, especially in hospital settings (Bolster 2015, Lees et al. 2014). The management of patients at risk of suicide requires specific nursing skills, including early recognition of warning signs and knowledge of preventive and protective strategies. Knowing risk factors and recognizing warning signs for suicide should be part of the professional background of any nurse training programs (Sela et al. 2024). Nurses should be trained to identify behaviors and warning signs of suicidal risk, such as sudden changes in mood, social isolation, lack of confidence in the future and lack of valid reasons to live.

Nursing care for people with suicidal intentions should be based on meaningful contact, considering each patient as a unique individual, with her own specific needs, experiences and perspectives. An empathetic and personalized approach is required: each patient should feel listened to and treated with respect and empathy in a patient centred approach. It is essential

that nurses not only recognize the signs of risk, but are also able to establish a trust relationship that allows the patient to openly express their emotions and thoughts. The nurse-patient relationship and the promotion of a sense of security and hope are critical in nursing care for patients who exhibit suicidal behaviour (Clua-García et al. 2021, Sellin et al. 2018).

Establishing a collaborative and therapeutic interaction is very important to identify suicide risk factors, thus enabling timely implementation of preventive interventions (APNA 2015).

With the purpose of providing support to the nurse in the care of the suicidal patient practice guidelines were developed by national scientific societies but also by local health authorities (APNA 2015, Morales-Romero et al. 2020). These were based on the best available evidence and aimed to help nurses regarding the recognition and assessment of risk factors and interventions in the management of patients at risk for suicide.

In this study we aimed to investigate nurses's comfort, confidence and competence related to preventing suicide with a view to identify correct preventive strategies regarding the nursing management of patients at risk of suicide.

METHODS

Our study presents the preliminary descriptive findings from an online survey in nursing staff operating in various areas (medical, surgical, critical and emergency) in the Apulia region. The survey aimed to assess

the current knowledge, attitudes, behaviors and training needs of nurses regarding suicide prevention. We administered a questionnaire created with Google forms to a sample of subjects obtained through sampling a reasoned choice. The questionnaire consisted of two sections: a section regarding general information data and a section with questions aimed at investigating current knowledge and training needs on the topic.

In the second section of the survey, the operator is invited to express his level of agreement with 10 questions using a three point Likert scale (1 = agree 2 = somewhat agree 3 = disagree).

The 10 questions are listed below:

1. In your opinion, does the nurse have an important role in the management of patients at risk of suicide in hospital?
2. Do you think you have adequate training on suicidal risk factors in a hospitalized patient?
3. Have you ever received training on possible nursing interventions to prevent suicide risk in hospital?
4. Have you ever been made aware of or have you ever seen protocols/guidelines on the prevention and management of patient suicide in hospital?
5. Have you ever had to manage patients with suicidal intentions?
6. In your opinion, would it be useful to follow a procedure for managing patients at risk of suicide in hospital?
7. Are you aware of a procedure for the prevention of hospital patient suicide in the local health authority where you work?
8. In your opinion, how important is teamwork with other professionals (doctor, psychologist, social worker, OSS) in the management of patients at risk of suicide?
9. At discharge of patients who have attempted suicide or are considered at risk of suicide, is it appropriate to ensure a "protected discharge", involving third parties and services who will look after the patient at home? (family members, caregivers, voluntary associations, mental health centre, general practitioner, integrated home care).
10. In your opinion, does "suicide or attempted suicide of a patient in hospital" represent a sentinel event that should be reported according to the monitoring protocol for sentinel events of the Ministry of Health?

RESULTS

84 nurses working in the Apulia region were recruited and filled out the questionnaire, expressing their level of agreement with questions proposed. Characteristics of the participants are presented in Table 1. Table 2 shows responses to questionnaire. Data highlighted that the majority of participants (81%) recognized the

significant role of the nurses in the management of a patient at risk for suicide but only 14.3% believed they had specific training on patients at risk of suicide. 50% of them stated they did not have adequate preparation regarding the possible preventive strategies in suicidal patient. 57.1% of interviewed reported that they had never become aware of protocols or guidelines on the prevention and management of hospitalized patients at risk of suicide.

Table 1. Characteristics of survey participants

Age at recruitment (years)	
Between 20 and 30 ys	50 %
Between 31 and 40 ys	28.6%
Between 41 and 50 ys	14.3%
> 50	7.1%
Field of work	
Medical	54.8%
Surgical	15.5%
Emergency	29.8%
Working experience (years)	
< 2 ys	28.6%
3-9 ys	42.9%
10-19 ys	15.5%
20-29 ys	13.1%
Health Institutions of survey participants	
Asl Bari	45.2%
Asl Brindisi	4.8%
Asl Taranto	13.1%
Asl BT	14.3%
Asl Lecce	4.8%
Universitary Polyclinic of Bari	7.1%
Other Institution	10.7%

Only 14.3% of those interviewed were satisfied with adequate training on suicidal risk factors in hospitalized patients and even only 7.1% stated that they have never received adequate training on possible nursing interventions for the prevention of suicidal risk. Although endorsed suicide prevention guidelines in the health institution where they work, 57.1% responded that they had never viewed them and only 38.9% partially.

In question five, 50% of the participating nurses answer declared that they had managed patients with suicidal intentions, 31% answer "partially"; 19% had no experience of it.

In question six, almost all of the survey participants (94%) recognized the usefulness of the presence of a protocol for hospitalized patients at risk of suicide.

In question seven, 65.5% of participants stated no being aware of specific procedures in the local health authorities in workplace and only 25% partially knew them.

Responses to question eight underlined that almost all of the interviewees (97.6%) agreed on the importance of teamwork with other healthcare professionals in the managing patients at suicide risk.

Table 2. Responses to questions investigating nurses' attitudes towards suicidal patients

Questions	Agree Respon- dents (%)	Somewhat agree Respondents (%)	Disagree Respondents (%)
1. In your opinion, does the nurse have an important role in the management of patients at risk of suicide in hospital?	81%	17.9%	1.1%
2. Do you think you have adequate training on suicidal risk factors in a hospitalized patient?	14.3%	54.8%	31%
3. Have you ever received training on possible nursing interventions to prevent suicide risk in hospital?	7.1%	42.9%	50%
4. Have you ever been made aware of or have you ever seen protocols/guidelines on the prevention and management of patient suicide in hospital?	6%	38.9%	57.1%
5. Have you ever had to manage patients with suicidal intentions?	50%	31%	19%
6. In your opinion, would it be useful to follow a procedure for managing patients at risk of suicide in hospital?	94%	6%	0%
7. Are you aware of a procedure for the prevention of hospital patient suicide in the local health authority where you work?	9.5%	25%	65.5%
8. In your opinion, how important is teamwork with other professionals (doctor, psychologist, social worker, OSS) in the management of patients at risk of suicide?	97.6%	2.4%	0%
9. At discharge of patients who have attempted suicide or are considered at risk of suicide, is it appropriate to ensure a "protected discharge", involving third parties and services who will look after the patient at home?	94%	6%	0%
10. In your opinion, does "suicide or attempted suicide of a patient in hospital" represent a sentinel event that should be reported according to the monitoring protocol for sentinel events of the Ministry of Health?	94%	6%	0%

In question nine, 94% recognized the importance of a protected discharge for patients who have attempted or have been assessed at risk of suicide, a procedure to be adopted and implemented.

At last, the majority of interviewed (94%) agreed that suicide it a sentinel event to be reported according to the protocol of the Ministry of Health.

DISCUSSION

Our results underlined the perceived critical role of nurses in the management of a patient at risk of suicide. This is in line with the majority of studies investigating beliefs and attitudes of nurses related to suicide prevention (Bolster et al. 2015).

Despite of this recognized key role, nurses perceived the lack of competence and skills in management of patients at risk of suicide (Sela et al. 2024, Wardig et al. 2022, Erbuto et al. 2021). Strong training gaps emerged from the answers to both the second and third questions, in which half of respondents stated that they do not have adequate preparation regarding preventive interventions in suicidal patients. Moreover, more than fifty per cent of interviewed nurses reported that they had never become aware of protocols or guidelines on the prevention and management of hospitalized patients at risk of suicide.

The presence of specific training needs clearly emerged from the data collected in our questionnaire.

Moreover, more than fifty per cent of interviewed nurses reported that they had never become aware of protocols or guidelines on the prevention and management of hospitalized patients at risk of suicide, did not feel adequately prepared and trained to deal with the management of this type of patient. There is growing evidence that lack of knowledge and specific training of nurses toward the suicidal patient can negatively affect patient safety and healthcare pathway (Anderson & Standen 2007, Osafa et al. 2012, Valente et al. 2011).

Specific training on management of suicidal patients should be priority to ensure that nurses can adequately respond to suicide at risk patients' needs, offering support that goes beyond mere clinical assistance and also embraces the human and relational aspect of care (Chan et al. 2008).

In this way, we will be able to contribute to building a more inclusive healthcare environment that is attentive to the emotional needs of patients, promoting their health.

We hope that in the coming years specific nurse suicide prevention trainings become a core element of undergraduate and postgraduate trainings for all nurses and be promoted by local health authorities and reference professional associations.

CONCLUSIONS

Our study highlighted the need to implement specific training programs for nurses on the management of patients at risk of suicide.

An adequate level of knowledge and competence regarding suicide prevention among healthcare professionals could significantly contribute to improving the quality of care provided to patients at risk for suicide, reducing the risk of suicidal events and improving the overall quality of the care pathway.

Acknowledgements: None.

Conflict of interest: None to declare.

Contribution of individual authors:

Antonella Litta: conceptualization, methodology, writing the first draft of the manuscript, bibliographic research, review&editing, supervision.

Francesca Bafaro: collection of data, administration of tests, writing and to bibliographic research.

Chiara Cutrone & Vincenzo Favia: writing and to bibliographic research.

Francesco Pastore: writing, reviewing and editing the manuscript content.

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